I.D. Control #	
License #	

## <u>Instrument of Admission or Increase in</u> <u>Commitment for a Preferred Limited Partner</u>

1. Partnership Name:					
2. Amount of Preferred Limited Partner's Capital Contribution:		(the "Settlement Date")			
3. Effective Date of Admission or Increase:					
Short Term Period Provisions:					
For the period beginning on the Settlement Date and ending o following terms shall apply:	(the	(the "Scheduled Pooling Date"), the			
4. Short Term Rate of Prioritized Payment:					
<ol> <li>Short Term Payment Date: the Business Day before the Scheduled Pooling Date</li> <li>Short Term Calculation Method: For the Short Term Period, Prioritized Payments will be calculated on the basis of a year of 360 days, for the actual number of days elapsed (including the first day but excluding the last day from the Settlement Date to the Scheduled Pooling Date (and, if extended by SBA, from the Scheduled Pooling Date the Pooling Date (as defined below)).</li> </ol>					
<ul><li>7. Extension Period from and including: to but excluding:</li><li>8. Extension Period Rates of Prioritized Payment:</li><li>9. Extension Period Payment Dates:</li></ul>	(a) (a) (a) (a)	(b) (b) (b) (b)	(c) (c) (c) (c)		
Long Term Period Provisions:					
For the period beginning on (the "Pool the following terms shall apply:	ling Date"), a	and ending on th	ne date set forth in item 12 bel	ow,	
10. Long Term Rate of Prioritized Payment:					
11. Long Term Payment Dates: February 1, May 1	, August 1, N	November 1			
12. Maturity Date:					

13. Long Term Calculation Method: For the Long Term Period, Prioritized Payments will be calculated on the basis of a year of 365 days, for the actual number of day elapsed (including the first day but excluding the last) from the Pooling Date to the Maturity Date.

## **Provisions Applicable to Short Term and Long Term Periods:**

If this is the first capital contribution by the Preferred Limited Partner in the partnership, the undersigned hereby is admitted and agrees to become a Preferred Limited Partner pursuant to the terms of the partnership's Agreement of Limited Partnership and to be bound by and comply with the terms of such Agreement. If the undersigned has already been admitted as a Preferred Limited Partner, the increase in the Preferred Limited Partner's capital contribution will be in the amount set forth in item 2 above effective on the Settlement Date.

The Prioritized Payme	nt payable with respect to this capital contribution shall be at the rate(s) set forth above.
An additional charge under the same terms and conditi	of% per annum shall be payable to the Preferred Limited Partner ons as are applicable to the payment of Prioritized Payments.
	have the same force and effect as if the undersigned parties had executed a counterpart of mited Partnership. Capitalized terms used in this Instrument shall have the respective nt of Limited Partnership.
IN WITNESS WHE	REOF the undersigned have executed this instrument as of
Partnership:	<del></del> ·
	(Partnership Name)
Ву:	(Name of General Partner)
Ву:	(Signature of Officer or General Partner)
Name	·
Title:	<del></del>
Preferred Limited Pa	artner:
	U.S. Small Business Administration (Name of Preferred Limited Partner)
Ву:	(Signature of Authorized Person)
Name Title:	
Addre	ss: U.S. Small Business Administration Investment Division, 409 Third Street, S.W. Washington, D.C. 20416